

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	446	5/1
TYPIST	452	7-3-95
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	431	5-2-95
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final	
1 1	3 27 95
2 2	v
3 3	
4 4	
5 5	=
6 6	v
7 7	v
8 8	v
9 9	v
10 10	v
11 11	v
12 12	=
13 13	=
14 14	v
15 15	v
16 16	=
17 17	v
18 18	v
19 19	v
20 20	v
21 21	=
22 22	=
23 23	v
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SYMBOLS

✓	Rejected
=	Allowed
- (through number)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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